

<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Application Number</b></td> <td>10/618,060</td> </tr> <tr> <td><b>Filing Date</b></td> <td>July 11, 2003</td> </tr> <tr> <td><b>First Named Inventor</b></td> <td>Robert Jackson</td> </tr> <tr> <td><b>Title</b></td> <td>SYSTEM DESIGN TOOLS</td> </tr> <tr> <td><b>Art Unit</b></td> <td>2825</td> </tr> <tr> <td><b>Examiner Name</b></td> <td>Paul Dihn</td> </tr> <tr> <td><b>Attorney Docket Number</b></td> <td>000174-0612-101</td> </tr> </table>	<b>Application Number</b>	10/618,060	<b>Filing Date</b>	July 11, 2003	<b>First Named Inventor</b>	Robert Jackson	<b>Title</b>	SYSTEM DESIGN TOOLS	<b>Art Unit</b>	2825	<b>Examiner Name</b>	Paul Dihn	<b>Attorney Docket Number</b>	000174-0612-101
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<b>Attorney Docket Number</b>	000174-0612-101														

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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City	State	Zip	
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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/06) submitted herewith or filed on \_\_\_\_\_

**SIGNATURE OF Applicant or Assignee of Record**

Signature		Date	9-15-11
Name	Brian H. Way	Telephone	(408) 544-7000
Title and Company	Director of Intellectual Property, Altera Corporation		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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